

UNITED STATES DISTRICT COURT
for the

Craig Cunningham
Plaintiff(s)

v.

)
)
)
)
)
)
Civil Action No.
)
)
)
)
)

3 14cv2181

Trilegiant et al
Defendant(s)

)
)
)
)
)

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address)

Safe Data trust INC via registered Agent
Brian C. Smith
3918 Tennessee Ave, Ste100
Chattanooga, TN 37409
A lawsuit has been filed against you.

RECEIVED
IN CLERK'S OFFICE
NOV 26 2014
U.S. DISTRICT COURT
MID. DIST. TENN.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Craig Cunningham
5543 Edmondson Pike
Ste 248
Nashville, TN 37211

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

NOV -7 2014

Date: _____

CLERK OF COURT

KEITH THROCKMORTON

J. Hawkins
Signature of Clerk or Deputy Clerk

RETURN COPY

Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)*
was received by me on *(date)* 11/18.

Safe Data TRUST

- I personally served the summons on the individual at *(place)* _____
on *(date)* _____; or
- I left the summons at the individual's residence or usual place of abode with *(name)* _____
, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or
- I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
on *(date)* _____; or

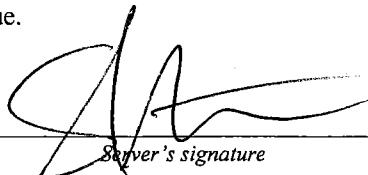
- I returned the summons unexecuted because _____; or

Other *(specify)*: USPS Certified mail w/ Return Receipt
7014 0510 0000 7626 8797

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 11/24/2014


Server's signature

MARICEL FORTEZZA

Printed name and title

5543 Edmondson Pike Ste 248 Nashville
Server's address 37211

Additional information regarding attempted service, etc:

UNITED STATES POSTAL SERVICE

21 NOV 2014 PM 2 7

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Maricel Forteza
5543 Edmondson PK.
Ste. 248
Nashville, TN 37211

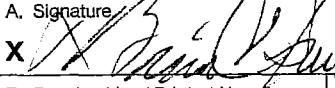
SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

STATE DATA TRUST INC.
3918 Tennessee Ave
Ste. 100
Chattanooga, TN 37409

COMPLETE THIS SECTION ON DELIVERY

A. Signature 	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	

3. Service Type
<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

2014 0510 0000 7626 8797

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540